

CONSENT FOR CONFIDENTIAL HIV TESTING

Completion of this form is required for testing to take place. ALL information recorded on this form is confidential and not shared without your consent except as provided by law. See Supplemental Information on the reverse side of this form.

I want to be tested for the human immunodeficiency virus (HIV), the virus that can cause AIDS.

I understand:

- The benefits and possible risks of testing.
- Additional counseling and assistance with health care and other services are available if I need them.
- My HIV test results will be kept confidential. If I have a confidential HIV test (with my name listed), I understand that Wisconsin statutes allow my test results to be released only to the persons or under the circumstances listed on the back of this form.

I have read the above information. It has been explained to me. My questions have been answered. I agree to be tested for HIV.

Name of Test Subject

Telephone Number of Test Subject

Address of Test Subject

Date of Birth of Test Subject

SIGNATURE - Test Subject

Date Signed

SIGNATURE - Person Legally Authorized to Consent on Behalf of
Test Subject

Date Signed

Phone Number of Signee

Relationship to Test Subject:

SUPPLEMENTAL INFORMATION FOR THE CONSENT FOR HIV TESTING FORM

There are three possible HIV test results:

- A **negative test result** means that a person is probably not infected with HIV. However, if a person has been recently exposed to HIV, it may be too soon to find out if infection has occurred. Re-testing may be necessary.
- A **positive test result** means that a person is infected with HIV and is able to spread the virus to others by having unprotected sex or sharing needles. If a person has not tested positive before, it is recommended that another test be done to verify the result.
- An **indeterminate test result** is neither negative nor positive. The person should be tested again as soon as possible.

No test is 100% accurate. Additional testing may be needed or recommended.

Redisclosure:

Wisconsin law requires that HIV test results can only be given to people who are authorized to have access to these results or in the limited circumstances specified in statute 252.15(5)(a).

The following are persons who may receive name-associated HIV test results under certain circumstances under Wisconsin statute 252.15 (5) (a). There are penalties for illegal release of HIV test results.

The person tested; and if the person is incapacitated, the person designated as the agent in the health care power of attorney;

The person's health care provider, including a health care provider who provides emergency care to the person tested;

An agent or employee of the tested person's health care provider who provides patient care or handles specimens of body fluids or tissues or prepares or stores patient health care records;

A blood bank, blood center or plasma center that subjects a person to a test;

A health care provider who procures, processes, distributes or uses a human body part for the purpose of ensuring medical acceptability of the donated body part;

The State Epidemiologist or his/her designee for the purpose of communicable disease investigation or control or epidemiologic surveillance;

A funeral director or to other persons who prepare a corpse for burial or other disposition; or to a person who performs or assists in an autopsy;

Health care facility staff committees or accreditation or health care services review organizations for conducting program monitoring, evaluations and reviews;

Under a court order;

A person who conducts research, if the researcher :

- Is affiliated with the tested person's health care provider, and
- Has obtained permission to perform the research from an institutional review board, and
- Provides written assurance that the information will not be released and will not identify the person tested without informed consent;

A person rendering emergency care to a victim if significantly exposed;

A coroner or medical examiner or assistant if :

- The HIV-infected status is relevant to the determination of cause of death, or
- During direct investigation the coroner, medical examiner or appointed assistant is significantly exposed to the subject;

A sheriff; jailer; keeper of a prison, jail or house of correction; for the purpose of assigning private cells;

If the test results were positive and the tested patient is now deceased, persons known by the deceased patient's physician to have had sexual contact or shared intravenous drug equipment with that patient;

A person who consents for testing an individual who is under 14 years of age, or declared incompetent by a court, or is unable to communicate because of a medical condition;

An alleged victim or victim of sexual assault, the victim or alleged victim's parent or guardian and the victim or alleged victim's healthcare provider;

To a person who is significantly exposed, as defined by state statute, through certain occupations;

To a foster parent or treatment foster parent or the operator of a group home, child caring institution or correctional facility in which a child is placed.

If the person is a prisoner, the prisoner's health care provider and medical and intake staff of the prison or jail.